

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 02, 1999 8:00 am
Secretary of State

04-02-1999 90032 024 ****61.25

DOCUMENT # 713116

1. Corporation Name

SPORTSMAN'S YACHT AND SAILING CLUBS, INC.

Principal Place of Business

1401 SE 47TH ST
CAPE CORAL FL 33904

Mailing Address

1401 SE 47TH ST
CAPE CORAL FL 33904



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

07/25/1967

4. FEI Number

59-1461487

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

10. Name and Address of New Registered Agent

VETTER, GLADYS
4939 PELICAN BLVD
CAPE CORAL FL 33904

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE
NAME JAKE, STEVEN
STREET ADDRESS 1125 SE 29TH TERRACE
CITY-ST-ZIP CAPE CORAL FL 33904

TITLE VP ☒ DELETE
NAME CHESTNUT, IRMA
STREET ADDRESS 1434 S.E. 17TH ST.
CITY-ST-ZIP CAPE CORAL FL 00000

TITLE D ☐ DELETE
NAME VETTER, WILLIAM
STREET ADDRESS 4939 PELICAN BLVD
CITY-ST-ZIP CAPE CORAL FL 00000 33914

TITLE TD ☐ DELETE
NAME VETTER, GLADYS
STREET ADDRESS 4939 PELICAN BLVD
CITY-ST-ZIP CAPE CORAL FL 00000

TITLE SD ☐ DELETE
NAME KIDD, EVELYN
STREET ADDRESS 314 S.E. 33RD ST.
CITY-ST-ZIP CAPE CORAL FL 00000

TITLE D ☒ DELETE
NAME KRUMREIG, EDWARD
STREET ADDRESS 4418 SE 12TH AVE
CITY-ST-ZIP CAPE CORAL FL 33904

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☐ Change ☒ Addition
1.2 NAME William D. Shuff
1.3 STREET ADDRESS 1300 S.E. 7th St. #105
1.4 CITY-ST-ZIP Cape Coral, Fl. 33904

2.1 TITLE VP ☐ Change ☒ Addition
2.2 NAME Clarence Keil
2.3 STREET ADDRESS 4419 N. Bay Circle
2.4 CITY-ST-ZIP North Ft. Myers 33903

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE D ☐ Change ☒ Addition
6.2 NAME William Kidd
6.3 STREET ADDRESS 314 S.E. 33rd St.
6.4 CITY-ST-ZIP Cape Coral, Fl. 33904

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gladys Vetter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/99

Date

941-549-5423

Daytime Phone #

CR2EN37 (11/99)